

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 OF 90
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. James T Montgomery

Mailing Address 1401 Foucher Street

City

New Orleans

State

LA

Zip Code

70115-3515

FEC ID number of contributing
federal political committee.

C

Name of Employer

Touro Infirmary

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 24 / 2012

Transaction ID : 19862394

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Mr. William R Holman FACHE

Mailing Address P O Box 2511

City

Baton Rouge

State

LA

Zip Code

70821-2511

FEC ID number of contributing
federal political committee.

C

Name of Employer

Baton Rouge General Medical Center

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 24 / 2012

Transaction ID : 19862395

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Ms. Coletta Barrett RN, MHA

Mailing Address 5000 Hennessy Boulevard

City

Baton Rouge

State

LA

Zip Code

70808-4375

FEC ID number of contributing
federal political committee.

C

Name of Employer

Our Lady of the Lake Regional Medical

Occupation

Vice President of Mission

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 24 / 2012

Transaction ID : 19862396

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1500.00